

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
PROGRAM SUPPORT BUREAU
QUALITY IMPROVEMENT DIVISION**

Type of Meeting	Service Area 6 QIC	Date	07/26/2018																																																																																									
Place	MLK Interns & Residents Bldg. I&R Conference Room 1670 E. 120th Street Los Angeles, CA 90059	Start Time:	9:10 am																																																																																									
Chairperson Co-Chairs	Dr. Erica Melbourne Kisha Thompson, LCSW Dr. Socorro Gertmenian	End Time:	11:00 am																																																																																									
Members Present	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;"><i>Erica Melbourne</i></td> <td style="width: 33%;"><i>DMH</i></td> <td style="width: 33%;"><i>J. Adrian Howard</i></td> <td style="width: 33%;"><i>PIC</i></td> </tr> <tr> <td><i>Kisha Thompson</i></td> <td><i>DMH</i></td> <td><i>Bosco Ho</i></td> <td><i>SSG/APR</i></td> </tr> <tr> <td><i>Socorro Gertmenian</i></td> <td><i>LACGC</i></td> <td><i>Michele Burton</i></td> <td><i>Aviva Children & Family</i></td> </tr> <tr> <td><i>Jennette Fackler</i></td> <td><i>JWCH Institute</i></td> <td><i>Marietta Watson</i></td> <td><i>Pacific Clinics</i></td> </tr> <tr> <td><i>Adriana Guerreo</i></td> <td><i>Drew CDC</i></td> <td><i>Maria Alonzo</i></td> <td><i>Hathaway-Sycamores</i></td> </tr> <tr> <td><i>Leah Gutierrez</i></td> <td><i>The Guidance Center</i></td> <td><i>Jessica Palma</i></td> <td><i>DMH</i></td> </tr> <tr> <td><i>Demitri Richmond</i></td> <td><i>1736 Family Crisis Center</i></td> <td><i>Ahmad Kausar</i></td> <td><i>DMH</i></td> </tr> <tr> <td><i>Kay Roberson</i></td> <td><i>Shields for Families</i></td> <td><i>Patricia Carrillo</i></td> <td><i>SHIELDS</i></td> </tr> <tr> <td><i>Kanisha Trotter</i></td> <td><i>AFH/FSP</i></td> <td><i>Jessica Calcaterra</i></td> <td><i>Crittenton</i></td> </tr> <tr> <td><i>Dana Longino</i></td> <td><i>BAFMA</i></td> <td><i>Mark Shokair</i></td> <td><i>CA Mentor</i></td> </tr> <tr> <td><i>Jocelyn Bush Spurlin</i></td> <td><i>UMMA</i></td> <td><i>Wil Lau</i></td> <td><i>CA Mentor</i></td> </tr> <tr> <td><i>Cheryl Gully</i></td> <td><i>HOPICS</i></td> <td><i>Mariko Yamada</i></td> <td><i>St. Francis</i></td> </tr> <tr> <td><i>Lummy Galbusera</i></td> <td><i>Alafia MHI</i></td> <td><i>Lynetta Shonibare</i></td> <td><i>DMH</i></td> </tr> <tr> <td><i>Nisaa Madyun</i></td> <td><i>DMH Compton</i></td> <td><i>Valencia Dunn</i></td> <td><i>PIC</i></td> </tr> <tr> <td><i>Kathy Saucedo</i></td> <td><i>Starview</i></td> <td><i>Kanisha McReynolds</i></td> <td><i>Amanecer CCS</i></td> </tr> <tr> <td><i>Martin McDermott</i></td> <td><i>Bayfront</i></td> <td><i>Elizabeth Echeverria</i></td> <td><i>Barbour & Floyd SCHARP</i></td> </tr> <tr> <td><i>Lily Fowler</i></td> <td><i>Didi Hirsch</i></td> <td><i>Yovette Roldan</i></td> <td><i>BFA & SCHARP</i></td> </tr> <tr> <td><i>Paul Ha</i></td> <td><i>Alafia MHI</i></td> <td><i>Aminah Ofumbi</i></td> <td><i>Didi Hirsch</i></td> </tr> <tr> <td><i>Jamie Chess</i></td> <td><i>Exodus Recovery</i></td> <td><i>Jeanie Takuki</i></td> <td><i>Drew CDC</i></td> </tr> <tr> <td><i>Jonna Howard</i></td> <td><i>SSG/Weber</i></td> <td><i>Michael Silverman</i></td> <td><i>DMH SFC</i></td> </tr> <tr> <td><i>Sharon Chapman</i></td> <td><i>WC</i></td> <td></td> <td></td> </tr> <tr> <td><i>Julie Elder</i></td> <td><i>SCHARP BFA</i></td> <td></td> <td></td> </tr> </table>				<i>Erica Melbourne</i>	<i>DMH</i>	<i>J. Adrian Howard</i>	<i>PIC</i>	<i>Kisha Thompson</i>	<i>DMH</i>	<i>Bosco Ho</i>	<i>SSG/APR</i>	<i>Socorro Gertmenian</i>	<i>LACGC</i>	<i>Michele Burton</i>	<i>Aviva Children & Family</i>	<i>Jennette Fackler</i>	<i>JWCH Institute</i>	<i>Marietta Watson</i>	<i>Pacific Clinics</i>	<i>Adriana Guerreo</i>	<i>Drew CDC</i>	<i>Maria Alonzo</i>	<i>Hathaway-Sycamores</i>	<i>Leah Gutierrez</i>	<i>The Guidance Center</i>	<i>Jessica Palma</i>	<i>DMH</i>	<i>Demitri Richmond</i>	<i>1736 Family Crisis Center</i>	<i>Ahmad Kausar</i>	<i>DMH</i>	<i>Kay Roberson</i>	<i>Shields for Families</i>	<i>Patricia Carrillo</i>	<i>SHIELDS</i>	<i>Kanisha Trotter</i>	<i>AFH/FSP</i>	<i>Jessica Calcaterra</i>	<i>Crittenton</i>	<i>Dana Longino</i>	<i>BAFMA</i>	<i>Mark Shokair</i>	<i>CA Mentor</i>	<i>Jocelyn Bush Spurlin</i>	<i>UMMA</i>	<i>Wil Lau</i>	<i>CA Mentor</i>	<i>Cheryl Gully</i>	<i>HOPICS</i>	<i>Mariko Yamada</i>	<i>St. Francis</i>	<i>Lummy Galbusera</i>	<i>Alafia MHI</i>	<i>Lynetta Shonibare</i>	<i>DMH</i>	<i>Nisaa Madyun</i>	<i>DMH Compton</i>	<i>Valencia Dunn</i>	<i>PIC</i>	<i>Kathy Saucedo</i>	<i>Starview</i>	<i>Kanisha McReynolds</i>	<i>Amanecer CCS</i>	<i>Martin McDermott</i>	<i>Bayfront</i>	<i>Elizabeth Echeverria</i>	<i>Barbour & Floyd SCHARP</i>	<i>Lily Fowler</i>	<i>Didi Hirsch</i>	<i>Yovette Roldan</i>	<i>BFA & SCHARP</i>	<i>Paul Ha</i>	<i>Alafia MHI</i>	<i>Aminah Ofumbi</i>	<i>Didi Hirsch</i>	<i>Jamie Chess</i>	<i>Exodus Recovery</i>	<i>Jeanie Takuki</i>	<i>Drew CDC</i>	<i>Jonna Howard</i>	<i>SSG/Weber</i>	<i>Michael Silverman</i>	<i>DMH SFC</i>	<i>Sharon Chapman</i>	<i>WC</i>			<i>Julie Elder</i>	<i>SCHARP BFA</i>		
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Call to Order & Introductions	Dr. Socorro Gertmenian called the meeting to order at 9:10a.m and followed with self-introductions.																																																																																											

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Review of Minutes	The June QIC minutes were tabled until the August meeting.	Minutes from the June meeting will be emailed to the membership by Jasmine Boyden. Please review for approval at the August meeting.	
OMD Updates	Safety Intelligence - the online clinical incident report process has started. Information on how to use was emailed in June. Contact Kisha Thompson if you did not receive it – kthompson@dmh.lacounty.gov .	Should providers need access with the Safety Intelligence system – they may contact Ly Ngo (213)351.6673 or LNgo@dmh.lacounty.gov OR Doris Benosa (213)351.6677 or DBenosa@dmh.lacounty.gov .	
Patient's Rights Office	PRO – Change of Provider Log process will be available online for DO agencies only. For LE, in 3 months CPO logs will be submitted online.	8/1 – DO will need to enter COP information online. LE Providers will be contacted and asked to identify as to whom at their agency will be responsible for submitting the COP logs online. Those identified staff will need to be trained first.	
Cultural Competency	Plan to collaborate and build a task force between health agencies - DPH/DHS/DMH. The goal is to strengthen CC across agencies.	Kisha Thompson to email out to the QIC membership a handout that describes the roll out and who will be responsible for what - Institute for Cultural, Linguistic Inclusion and Responsiveness (ICLIR).	
Compliance	DO's need to check the Learning Net regularly for information re: mandatory trainings.		
Quality Improvement Division Updates	Non-Clinical PIP – focus is on front desk customer satisfaction.	An update will be provided at the meeting in August, 2018.	Dr. E. Melbourne, 8/23/2018

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DO's	DMH is hiring pharmacy techs for DO locations. More information to come along with a memo explaining their role.		
Chart Reviews	Dr. Bertrand Levesque, PSB/QA/Training & Operation reviewed the chart review process for DO & LE that is being conducted by DMH QA. DO & LE were reminded to contact Dr. Levesque with dates, LE information, District Chief, Provider Number, Address of where the chart reviews may be conducted (and parking instructions), Name of CEO and others that should be notified about the review process and contact information for the point of contact. There was also a discussion around how the charts should be prepared. Agencies will need to provide hard copy documents that have been redacted as client records will not be reviewed via agency EHR's for the review. The chart review period and additional details will be provided to upon notification of review.	The reviews have already started. If agencies have not contacted Dr. Levesque to date, they should follow up with their program leads and determine who should do the outreach so that the process may begin.	
Treatment Planning Training	Dr. Levesque, PSB/QA/Training & Operation provided brief overview on the process of treatment planning.	Time ran short so we may revisit the presentation in subsequent mtgs as requested by the QIC membership.	
Audits	The Guidance Center - MR Grant		
QA Feedback	Per Dr. Gertmenian: 1) <u>Objectives</u> : objectives need to measurable. Even though SMART is no longer specifically required, objectives still need to be specific and measurable and connected to the mental health needs of the client. 2) <u>Timeliness of documentation</u> : DMH turnaround is 24 hours. Providers were		

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	<p>encouraged to practice collaborative/concurrent documentation.</p> <p>3) <u>Interventions & PN</u>: need to be specific - what are the specific interventions that were provided. Notes are to include active interventions that are clinically sound. Interventions that help maintain or improve the overall functioning of the client.</p> <p>4) <u>Substance Use</u>: If your agency is not drug Medi-Cal, then you are not allowed to claim to objectives that are substance focused. Interventions may state how staff are going to assist the client in developing more appropriate and adaptive coping skills. The focus needs to be on mental health and may address triggers and how substance use/abuse may be used as a coping mechanism. As a provider, you are still working on the clients triggers and underlying substance use. Showing the client how their substance use impacts their mental health symptoms.</p> <p>Per Dr. Levesque</p> <p>5) <u>Med Consent (OMR)</u>: The current version of the form (MH556, revised 9/26/16) was reviewed and discussion of how to use the form accurately was mentioned. No blank spaces and signed by the client/their representative, the psychiatrist and the date signed. Agencies were advised to refer to LACDMH Policy 306.02 for protocol of what is required. Additionally, it was noted that OMR's shall be completed annually (pg. 3 of 7, item 4.1.2 of LACDMH Policy 306.02)</p>	<p>Related to Item #5) Med Consent/OMR:</p> <ul style="list-style-type: none"> • Agencies need to confirm that their EHR is able to capture the date it was signed by the psychiatry staff and client/authorized representative. • Also, if the doctor changes the range of the medication or the medication rx, then then a new consent (OMR) needs to be completed. 	

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<p>QA Bulletins</p>	<ol style="list-style-type: none"> 1) <u>Timely Access to Care</u>: document reviewed. Need to track client access on Service Request Log (DMH will review). Treatment Plans: providers need to clearly document the frequency of services on the treatment plan. 2) <u>MAA Manual</u>: distributed to SA6 QIC Membership. For DO providers only. 3) <u>Notice of Privacy Practices Bulletin</u>: for DO agencies. LE are advised to review it and ensure that they have a practice that is similar. 4) <u>Guide to Procedure Codes</u>: what has been updated - Disciplines, pg. 7; Place of Service Codes added pgs. 8-9 and updates to telehealth. 5) <u>Revision to LACDMH Policies</u>: <ol style="list-style-type: none"> a) 302.07: Access to Care - Revised Policy. b) 302.XX: Recording Initial Requests for Services (New Policy Number). c) 312.02: Opening & Closing of Service Episodes - Revised Policy. d) 202.31: Care Coordination – Revised Policy e) 401.01: Clinical Records: Maintenance – Revised Policy. f) 401.02: Clinical Records: Contents & Documentation Entry – Revised Policy. 	<ol style="list-style-type: none"> 1) Q: If an appt is provided to a client outside of the time frames noted, which agency is responsible for completing the NOA. Ans: the NOA is the responsibility of the agency that the client was referred to. 	
<p>Documentation and Treatment Timelines</p>	<p>State and County may be following up with agencies re: how long does a client take from assessment to treatment. How are agencies tracking how long a client is in each phase of treatment – how is it being tracked and is it being tracked.</p>		

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Co-Practitioners	<p>DO agencies – everyone is required to write their own note for services provider when there is a co-provider. For groups – drop the co-facilitator and only the leader of the group should write the note.</p> <p>LE – EHR needs to be able to separate out the claims of the two providers – if not, then the co-provider needs to be dropped from the claim.</p> <p>Clarification regarding claiming time was provided as well.</p>		
Triage Form & Practice	<p>For discussion only as this document is in DRAFT form and has not been adopted. More details to come as this process has not been finalized.</p>	<p>Providers were asked not to distribute the form.</p>	
Medi-Cal Certification	<ol style="list-style-type: none"> 1) Fire clearance - make sure that it is current. 2) Clinic NPI information must match what the county has on file. 3) Ensure that you have an updated record retention policy! 4) If Medi-Cert Team contacts you, contact them back immediately! 		
Announcements	<p>None</p>		
Handouts	<ol style="list-style-type: none"> 1. Agenda 2. Meeting Minutes: June 28, 2018 – N/A 3. QA Bulletin 18-08 Final Rule: Access to Care 4. Timely Access to Care 5. QA Bulletin 18-09 MAA Manual Revisions 6. LACDMH P&P 205.05 Request for COP 7. LACDMH 18-01 Policy Bulletin 8. QA Division Policy Updates – July 2018 9. Updates to the Guide to Procedure Codes – rev. July 2018 10. Mental Health Triage DRAFT 	<p>QIC Meeting minutes from June 28, 2018 will be emailed.</p>	

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	11. QA Division Documentation Training Schedule – rev. 7/9/2018		
Next Meeting	Next Meeting is August 23, 2018 (9:00a.m. – 11:00 a.m.) at MLK Interns & Residents Bldg., 1670 E. 120 th St., Los Angeles, CA 90059.		

Respectfully Submitted, Dr. Erica Melbourne, SA 6 Administration